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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

### Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	t 1: Identify Yourself						
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):			
1.	Your full name						
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Maurielle First name  Lerae Middle name  Chambers Last name and Suffix (Sr., Jr., II, III)		First name  Middle name  Last name and Suffix (Sr., Jr., II, III)			
2.	All other names you have used in the last 8 years						
	Include your married or maiden names.						
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0424					

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Case number (if known)

Debtor 1 Maurielle Lerae Chambers

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 1025 Leawood Drive Joliet. IL 60431 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Will County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Maurielle Lerae Chambers

Case number (if known)

7.	The chapter of the								
	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	Chapter 7							
			hapter 11						
			hapter 12						
			hapter 13						
			·						
3.	How you will pay the fee		about how yo	e entire fee when I file my petition. Please check with the clerk's office in your local court for more details ou may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with					
					Illments. If you choose this of (Official Form 103A).	ption, sign and attach the Application for I	Individuals to Pay		
			I request that but is not req applies to you	t my fee be wai uired to, waive yo ur family size and	ved (You may request this op our fee, and may do so only if I you are unable to pay the fe	otion only if you are filing for Chapter 7. By if your income is less than 150% of the offi te in installments). If you choose this optio Official Form 103B) and file it with your pet	cial poverty line that n, you must fill out		
<b>)</b> .	Have you filed for bankruptcy within the	■ N							
	last 8 years?	☐ Ye							
			District		When				
			District		When	Case number			
			District		When	Case number			
10.	Are any bankruptcy	■ N	0						
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an	□ Ye							
	affiliate?		Dahaa			Deletionalis to con-			
			Debtor		When	Relationship to you			
			District Debtor		vvnen	Case number, if known Relationship to you			
			District		When	Case number, if known			
			Diotriot		WIGH	Case Hamber, ii known			
11.	Do you rent your residence?	■ N			and a second second second second				
		□ Ye	_		, ,	ainst you and do you want to stay in your r	esidence?		
				No. Go to line 1			1.60		
				Yes. Fill out <i>Init</i> bankruptcy petit		on Judgment Against You (Form 101A) ar	nd tile it with this		

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Debtor 1 Maurielle Lerae Chambers

Case number (if known)

Par	Report About Any Bu	sinesses	You Own	as a Sole Propriet	or		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of bus	iness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Stat	e & ZIP Code		
	it to this petition.		Check	the appropriate bo	x to describe your business:		
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))		
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).				
	For a definition of small	No.	■ No. I am not filing under Chapter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.			
		☐ Yes.	I am f	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Pari	t 4: Report if You Own or	Have Any	Hazardo	us Property or Any	y Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is	he hazard?			
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	Number, Street, City, State & Zip Code		
					, , <del> , </del>		

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Debtor 1 Maurielle Lerae Chambers

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Page 6 of 52 Document Case number (if known) Debtor 1 **Maurielle Lerae Chambers** Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 □ 200-999 How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million **\$0 - \$50,000** □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Maurielle Lerae Chambers Signature of Debtor 2 Maurielle Lerae Chambers

Executed on

MM / DD / YYYY

Signature of Debtor 1

Executed on November 11, 2016

MM / DD / YYYY

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Debtor 1 Maurielle Lerae Chambers Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Christina Banyon	Date	November 11, 2016
Signature of Attorney for Debtor		MM / DD / YYYY
Christina Banyon		
Printed name		
Banyon & Scheinbaum, LLC		
Firm name		
3077 West Jefferson Street		
Suite 107		
Joliet, IL 60435		
Number, Street, City, State & ZIP Code		
Contact phone	Email address	cbanyon.law@gmail.com
6283282		
Bar number & State		

			THE LAURE OF DE						
Fill in this infor	Il in this information to identify your case:								
Debtor 1	Maurielle Lerae C	Maurielle Lerae Chambers							
	First Name	Middle Name	Last Name						
Debtor 2									
(Spouse if, filing)	First Name	Middle Name	Last Name						
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS						
Case number (if known)									

☐ Check if this is an amended filing

12/15

### Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

	Your as Value o	ssets f what you own
Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$	18,905.00
1c. Copy line 63, Total of all property on Schedule A/B	\$	18,905.00
t 2: Summarize Your Liabilities		
		abilities you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	18,126.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	47,129.62
Your total liabilities	\$	65,255.62
t 3: Summarize Your Income and Expenses		
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,689.58
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,669.00
4: Answer These Questions for Administrative and Statistical Records		
Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	edules.
■ Yes What kind of debt do you have?		
	1a. Copy line 55, Total real estate, from Schedule A/B	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

6,558.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Case 16-35985 Doc 1 Filed 11/11/16 Entered 11/11/16 10:16:24 Desc Main Document Page 10 of 52 Fill in this information to identify your case and this filing: Debtor 1 **Maurielle Lerae Chambers** First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put **Buick** Make: Who has an interest in the property? Check one 3 1 the amount of any secured claims on Schedule D: Verano Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2013 Debtor 2 only Current value of the Current value of the 40.000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$15,000.00 \$15,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$15,000.00 pages you have attached for Part 2. Write that number here......>>

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

Official Form 106A/B Schedule A/B: Property

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15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$2,400.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own? Do not deduct secured

Official Form 106A/B

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				claims or exemptions.
16	□ No	ave in your wallet, in your hor	ne, in a safe deposit box, and on hand when you file your petiti	ion
			Cash	\$200.00
17			unts; certificates of deposit; shares in credit unions, brokerage with the same institution, list each.	houses, and other similar
	■ Yes		Institution name:	
_		17.1. Checking	First Midwest Checking	\$1,300.00
		17.2.	First Midwest Savings	\$5.00
18	B. Bonds, mutual funds, or Examples: Bond funds, in		kerage firms, money market accounts	
	Yes	Institution or issuer n	ame:	
19	Non-publicly traded sto joint venture	ck and interests in incorpo	rated and unincorporated businesses, including an interes	st in an LLC, partnership, and
	■ No			
	☐ Yes. Give specific info	rmation about them Name of entity:	 % of ownership:	
20	Negotiable instruments in	nclude personal checks, cash ents are those you cannot tran	iable and non-negotiable instruments niers' checks, promissory notes, and money orders. nsfer to someone by signing or delivering them.	
21	<ul> <li>Retirement or pension a         Examples: Interests in IR</li> <li>□ No</li> </ul>		03(b), thrift savings accounts, or other pension or profit-sharing	plans
	Yes. List each account	separately.  Type of account:	Institution name:	
			401 (K) Through Employer	Unknown
22		deposits you have made so	that you may continue service or use from a company ublic utilities (electric, gas, water), telecommunications compar	nies, or others
	☐ Yes		Institution name or individual:	
23	B. Annuities (A contract for ■ No	a periodic payment of money	to you, either for life or for a number of years)	
	• • • •	uer name and description.		
24	26 U.S.C. §§ 530(b)(1), 52		alified ABLE program, or under a qualified state tuition pro	ogram.
	■ No □ YesInst	titution name and description.	. Separately file the records of any interests.11 U.S.C. § 521(c)	:

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De	ebtor 1	Maurielle Lerae C	hambers	Document	Case number (if known)	
25.	Trusts ■ No	, equitable or future ir	nterests in prope	erty (other than anything	g listed in line 1), and rights or powers exe	rcisable for your benefit
	☐ Yes.	Give specific informati	on about them			
26.				ets, and other intellectu proceeds from royalties a		
	☐ Yes.	Give specific informati	on about them			
		ses, franchises, and of ples: Building permits, e			holdings, liquor licenses, professional license	es
		Give specific informati	on about them			
Mo	oney or	property owed to you	?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	_	funds owed to you				
	■ No □ Yes.	Give specific information	on about them, inc	cluding whether you alrea	ady filed the returns and the tax years	
	Examp	r support ples: Past due or lump s Give specific information		usal support, child suppo	ort, maintenance, divorce settlement, property	settlement
30.		amounts someone ow ples: Unpaid wages, dis benefits; unpaid lo	sability insurance		efits, sick pay, vacation pay, workers' comper	nsation, Social Security
	☐ Yes.	Give specific informati	on			
		sts in insurance policion of the state of th		health savings account (h	HSA); credit, homeowner's, or renter's insurar	ice
		Name the insurance co	ompany of each p Company name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
	If you somed		living trust, expec	n someone who has die ct proceeds from a life ins	d surance policy, or are currently entitled to rece	eive property because
	Exam <sub>l</sub> ■ No		ment disputes, in	you have filed a lawsui surance claims, or rights	t or made a demand for payment to sue	
	■ No			every nature, including	g counterclaims of the debtor and rights to	set off claims
		Describe each claim				
	■ No	nancial assets you did Give specific informati	_			

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Case number (if known) Document Debtor 1 **Maurielle Lerae Chambers** 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$1,505.00 for Part 4. Write that number here...... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ..... \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$15,000.00 57. Part 3: Total personal and household items, line 15 \$2,400.00

Total of all property on Schedule A/B. Add line 55 + line 62 \$18,905.00

\$1,505.00

\$18,905.00

\$0.00

\$0.00

\$0.00

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 5

Part 4: Total financial assets, line 36

Part 5: Total business-related property, line 45

Part 7: Total other property not listed, line 54

Total personal property. Add lines 56 through 61...

Part 6: Total farm- and fishing-related property, line 52

59.

60.

61.

\$18,905.00

			III FAUG 13 ULJZ	
Fill in this infor	mation to identify your	case:		
Debtor 1	Maurielle Lerae C	hambers		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the Pro	perty You	Claim as	Exempt
---------	----------	---------	-----------	----------	--------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	portion you own	AIII	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2013 Buick Verano 40,000 miles Line from Schedule A/B: 3.1	\$15,000.00		\$2,400.00	735 ILCS 5/12-1001(c)
Line Horri Schedule Avb. 3.1			100% of fair market value, up to any applicable statutory limit	
Misc. Household Goods and Furniture	\$950.00		\$950.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Personal Used Clothing of Debtor Line from Schedule A/B: 11.1	\$600.00		\$600.00	735 ILCS 5/12-1001(a)
Elle Holli Garedale 74 B. 1111			100% of fair market value, up to any applicable statutory limit	
Wedding Band Line from Schedule A/B: 12.1	\$750.00		\$750.00	735 ILCS 5/12-1001(b)
Line Horri Schedule A/D. 12-1			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
Line nom Scriedule A/D. 10.1			100% of fair market value, up to any applicable statutory limit	

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Debtor 1 Maurielle Lerae Chambers

	iddi iono Eordo Ondiniboro			ease names (in this int)	
	scription of the property and line on le A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	ing: First Midwest Checking m Schedule A/B: 17.1	\$1,300.00		\$1,300.00	735 ILCS 5/12-1001(b)
LINE NO	III Schedule A/D. 11.1			100% of fair market value, up to any applicable statutory limit	
	lidwest Savings m Schedule A/B: 17.2	\$5.00		\$5.00	735 ILCS 5/12-1001(b)
Line noi	in deficable PVD. TT.E			100% of fair market value, up to any applicable statutory limit	
• •	) Through Employer m Schedule A/B: 21.1	Unknown		\$0.00	735 ILCS 5/12-1006
Line froi	m Scriedule A/B: Z1.1			100% of fair market value, up to any applicable statutory limit	
(Subject ■ No	u claiming a homestead exemption t to adjustment on 4/01/19 and every s. Did you acquire the property cove	/ 3 years after that for ca	ases fi	,	,
	Yes				

Case 10-33	)965 D	OCI FIIEU II/II/.	Page 17	u 11/11/10 10	16.24 Desc N	iaiii
Fill in this information to ide	entify your c	Document Document	Paue 17	01.52		
Debtor 1 Mauriell First Name	le Lerae Ch	nambers Middle Name	Last Name			
Debtor 2		Middle Name	Last Name			
(Spouse if, filing) First Name		Middle Name	Last Name			
United States Bankruptcy Cou	urt for the:	NORTHERN DISTRICT OF	ILLINOIS			
Case number						
(if known)					☐ Check	if this is an
					amend	ded filing
O(('.'.'.   E 400D						
Official Form 106D						
Schedule D: Cred	ditors V	Vho Have Claim	s Secured	by Property	y	12/15
Be as complete and accurate as s needed, copy the Additional Ponumber (if known).						
. Do any creditors have claims s	secured by yo	ur property?				
	• •	form to the court with your ot	her schedules. Yo	ou have nothing else to	report on this form.	
Yes. Fill in all of the infe		·	anor corroduico. Te	ou have nouning clos a	o repert on the form.	
		JW.				
Part 1: List All Secured C	laims			Column A	Column B	Column C
<ol><li>List all secured claims. If a cre for each claim. If more than one of</li></ol>				Amount of claim	Value of collateral	Unsecured
much as possible, list the claims in				Do not deduct the	that supports this	portion
2.1 Car Max Auto Finance	ce De	escribe the property that secur	res the claim:	value of collateral. \$18,126.00	claim \$15,000.00	If any \$3,126.00
Creditor's Name		013 Buick Verano 40,000		Ψ10,120.00	Ψ10,000.00	Ψο,120.00
	Δ,	s of the date you file, the claim	is: Check all that			
PO Box 440609	ар	ply.	13. Officer all triat			
Kennesaw, GA 3016		Contingent				
Number, Street, City, State & Zip	_	Unliquidated				
Miles access that dall (O.O.)		Disputed				
Who owes the debt? Check on	_	ature of lien. Check all that app	-			
Debtor 1 only	L	I An agreement you made (such car loan)	as mortgage or sec	ured		
Debtor 2 only		- car loany				
Debtor 1 and Debtor 2 only		Statutory lien (such as tax lien,	mechanic's lien)			
At least one of the debtors and		Judgment lien from a lawsuit				
Check if this claim relates to community debt	oa L	Other (including a right to offse	.t)			
Date debt was incurred		Last 4 digits of account n	umber <u>3520</u>			
Add the dollar value of your en	ntries in Colu	mn A on this page. Write that n	number here:	\$18,12	6.00	
If this is the last page of your				\$18,12		
Write that number here:				φ10,1Z	0.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

`	Jaco 10 00000 L	Document	Page 18 of 52	.U.1U.24 DCC	o man
Fill in this info	ormation to identify your				
Debtor 1	Maurielle Lerae C	hambors			
Debioi i	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS		
Case number					
(if known)				c	heck if this is an
				aı	mended filing
Official Ea	rm 106E/E				
	<u>rm 106E/F</u>		Claima		40/45
		ho Have Unsecured e Part 1 for creditors with PRIORITY			12/15
Schedule D: Cre eft. Attach the C name and case	editors Who Have Claims Sec Continuation Page to this pag number (if known).	ired Leases (Official Form 106G). Do ured by Property. If more space is n e. If you have no information to rep	needed, copy the Part you need, fill	I it out, number the ent	ries in the boxes on the
	t All of Your PRIORITY Un				
_ `	ditors have priority unsecure	d claims against you?			
No. Go t	o Part 2.				
☐ Yes.					
Part 2: List	t All of Your NONPRIORIT	Y Unsecured Claims			
3. Do any cree	ditors have nonpriority unsec	ured claims against you?			
☐ No. You	have nothing to report in this p	art. Submit this form to the court with y	your other schedules.		
Yes.					
unsecured of	claim, list the creditor separately	aims in the alphabetical order of the r for each claim. For each claim listed, st the other creditors in Part 3.If you h	, identify what type of claim it is. Do n	ot list claims already inc	luded in Part 1. If more
					Total claim
4.1 Amer	rican Anesthesiology	Last 4 digits of acco	ount number 2940		\$126.50
•	ority Creditor's Name				
	ox 88087 ago, IL 60680	When was the debt	incurred?		
Numbe	er Street City State Zlp Code	As of the date you f	ile, the claim is: Check all that apply	/	
	ncurred the debt? Check one.	•			
■ Deb	otor 1 only	☐ Contingent			
☐ Deb	otor 2 only	☐ Unliquidated			
☐ Deb	otor 1 and Debtor 2 only	☐ Disputed			
☐ At I	east one of the debtors and and		ITY unsecured claim:		
☐ Che	eck if this claim is for a comr	nunity			
debt		☐ Obligations arising	g out of a separation agreement or di	ivorce that you did not	
	claim subject to offset?	report as priority clain			
■ No		·	or profit-sharing plans, and other sim	nilar debts	
☐ Yes	3	Other Specify	<b>Viedical</b>		

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Document Page 19 of 52 Debtor 1 Maurielle Lerae Chambers Case number (if know) 4.2 Associated Radiologists of Joliet Last 4 digits of account number 4809 \$6.00 Nonpriority Creditor's Name 6801 W. 73rd Street #637 When was the debt incurred? Bedford Park, IL 60499 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Debt ☐ Yes 4.3 **Bank of the West** Last 4 digits of account number 4198 \$19,898.00 Nonpriority Creditor's Name PO Box 2634 When was the debt incurred? Omaha. NE 68103 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes 2008 Chevy Silverado Other. Specify 4.4 **Capital One** Last 4 digits of account number \$1,440.64 1556 Nonpriority Creditor's Name PO Box 6492 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans

■ No

☐ Yes

report as priority claims

■ Other. Specify Credit Card

 $\square$  Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Is the claim subject to offset?

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Document Page 20 of 52 Debtor 1 Maurielle Lerae Chambers Case number (if know) 4.5 Capital One Last 4 digits of account number 7131 \$585.00 Nonpriority Creditor's Name PO Box 6492 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit card purchases 4.6 Cigna Last 4 digits of account number 6455 \$932.55 Nonpriority Creditor's Name PO Box 182223 When was the debt incurred? Chattanooga, TN 37422 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other. Specify 4.7 Comcast Last 4 digits of account number 4951 \$856.71 Nonpriority Creditor's Name 1711 E. Wilson Street When was the debt incurred? Batavia, IL 60510 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed

Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Utility ☐ Yes

D - I- 1	Case 10 00000 B001	Document Page 21 of 52	iani
Debt	or 1 Maurielle Lerae Chambers	Case number (if know)	
4.8	Comcast	Last 4 digits of account number 4951	\$914.84
	Nonpriority Creditor's Name PO Box 3001	When was the debt incurred?	
	Southeastern, PA 19398		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify <b>Utility</b>	
	_ 100	- Other. Specify	
4.9	Comenity - The RoomPlace	Last 4 digits of account number 7990	\$3,908.00
	Nonpriority Creditor's Name PO Box 659704	When was the debt incurred?	
	San Antonio, TX 78265  Number Street City State Zlp Code	As of the data you file the plains in Ol. 1, 11, 11, 1	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	
44			
4.1 0	Comenity Bank	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name PO Box 182273	When was the debt incurred?	
	Columbus, OH 43218		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans	
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	

■ No

☐ Yes

Other. Specify Credit Card

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

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Document Page 22 of 52 Debtor 1 Maurielle Lerae Chambers Case number (if know) 4.1 Comenity Bank / NWYRK & CO 7963 \$358.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 659728 San Antonio, TX 78265 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.1 **Credit One Bank** 7133 \$1,987.98 Last 4 digits of account number 2 Nonpriority Creditor's Name PO Box 60500 When was the debt incurred? City of Industry, CA 91716 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit card purchases ☐ Yes 4.1 **Credit One Bank** 5244 \$1.899.78 Last 4 digits of account number 3 Nonpriority Creditor's Name PO Box 60500 When was the debt incurred? City of Industry, CA 91716 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

Is the claim subject to offset?

report as priority claims

■ Other. Specify Credit Card

☐ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

Debte	or 1 Maurielle Lerae Chambers	Document Page 23 of 52 Case number (if know)	
4.1	Creditors Collections Bureau	Last 4 digits of account number 9361	\$987.00
<b>T</b>	Nonpriority Creditor's Name PO Box 63	When was the debt incurred?	·
	Kankakee, IL 60901  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection	
4.1	First National Bank Omaha	Last 4 digits of account number 1009	\$2,995.00
<u> </u>	Nonpriority Creditor's Name PO BOX 700 Paragould, AR 72451	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify	
4.1	Jefferson Capital System	Last 4 digits of account number 5335	\$633.00
	Nonpriority Creditor's Name		
	16 Mcleland Road	When was the debt incurred?	
	Saint Cloud, MN 56303  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	

■ No

☐ Yes

■ Other. Specify Collection

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

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ebtor 	1 Maurielle Lerae Chambers	Document Page 24 of 52 Case number (if know)	
1	L Claude Ashinberg	Last 4 digits of account number 4867	\$50.00
	Nonpriority Creditor's Name 114 Barney Joliet, IL 60435	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Debt	
	New York and Company	Last 4 digits of account number 6692	\$842.11
	Nonpriority Creditor's Name		
	PO Box 659728	When was the debt incurred?	
	San Antonio, TX 78265  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	• • • • • • • • • • • • • • • • • • • •	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	$\square$ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card	
	Personal Finance Company	Last 4 digits of account number 6407	\$2,269.00
	Nonpriority Creditor's Name	<del></del>	
	2009 Essington Road Joliet, IL 60435	When was the debt incurred?	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Пол	
	_	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	

■ No

☐ Yes

■ Other. Specify Personal Loan

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

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1 Maurielle Lerae Chambers	Case number (if know)	
Presence Health	Last 4 digits of account number 3159	\$4,940
Nonpriority Creditor's Name Patient Financial Services 1643 Lewis Avenue, Suite 203	When was the debt incurred?	
Billings, MT 59102  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Medical	
Presence Saint Joseph Medical		
Cente	Last 4 digits of account number	Unkno
Nonpriority Creditor's Name 32814 Collection Center Drive	When was the debt incurred?	
Chicago, IL 60693  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneck all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical	
Quest Diagnostics	Last 4 digits of account number 6405	\$13
Nonpriority Creditor's Name PO Box 740397	When was the debt incurred?	
Cincinnati, OH 45274  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the damins. Oncot all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

Other. Specify Medical

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Document Page 26 of 52 Debtor 1 Maurielle Lerae Chambers Case number (if know) 4.2 **Quest Diagnostics** 4131 \$23.63 Last 4 digits of account number 3 Nonpriority Creditor's Name PO Box 740397 When was the debt incurred? Cincinnati, OH 45274 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical ☐ Yes 4.2 **RK Natesh** 5990 \$525.34 Last 4 digits of account number Nonpriority Creditor's Name 1100 Essington Road When was the debt incurred? Suite 6 Joliet, IL 60435 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical 4.2 **Trust Credit Solutions** 1508 \$303.00 Last 4 digits of account number Nonpriority Creditor's Name 12527 Central Avenue NE When was the debt incurred? Suite 290 Minneapolis, MN 55434 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans

debt

■ No

☐ Yes

■ Other. Specify Collection

report as priority claims

 $\square$  Obligations arising out of a separation agreement or divorce that you did not

 $\square$  Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Is the claim subject to offset?

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Debtor 1 Maurielle Lerae Chambers

Verizon Wireless	Last 4 digits of account number 1820	\$633.00
Nonpriority Creditor's Name		
PO Box 26055	When was the debt incurred?	
Minneapolis, MN 55426  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Utility	

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				•	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	47,129.62
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	47,129.62

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

			H I UUX: EU UI UE				
Fill in this infor	ill in this information to identify your case:						
Debtor 1	Maurielle Lerae C	hambers					
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS				
Case number							
(if known)				☐ Check if this is amended filing			

### Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	h whom you have the cer, Street, City, State and ZIP Co	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	-,				

		Docume	ent Page 29 d	of 52	
Fill in thi	s information to identify your	case:			
Debtor 1	Maurielle Lerae (	Middle Name	Last Name		
D-64 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, f	iling) First Name	Middle Name	Last Name		
(	3,				
United St	tates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
_					
Case nur	nber			_	Chook if this is an
(ii kilowii)					
					amended filing
Officia	al Form 106H				
Sche	dule H: Your Cod	ebtors			12/15
your nam	and number the entries in the e and case number (if known o you have any codebtors? (If	). Answer every question		to this page. On the top of any as a codebtor.	Additional Pages, write
	, , o a	you are ming a joint oace,	do not not officer opodoc	ac a coacsion.	
■ No	0				
□Y€	es				
				y? (Community property states a	and territories include
Arizo	ona, California, Idaho, Louisiana	, Nevada, New Mexico, Pu	erto Rico, Texas, Wash	ington, and Wisconsin.)	
■ Nz	o. Go to line 3.				
		una ar lagal aguivalant live	with you at the time?		
<b>□</b> 16	es. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in lin Form	ne 2 again as a codebtor only n 106D), Schedule E/F (Officia	if that person is a guaran	tor or cosigner. Make	rif your spouse is filing with yo sure you have listed the credit 16G). Use Schedule D, Schedul	or on Schedule D (Official
out (	Column 2.				
	Column 1: Your codebtor			Column 2: The creditor to	whom you owe the debt
	Name, Number, Street, City, State and Z	IP Code		Check all schedules that ap	
3.1				Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		
3.2				Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		

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								ı				
	in this information of		ase: rae Chambers									
	otor 2 buse, if filing)						_					
Uni	ted States Bankrup	otcy Court for the	: NORTHERN DISTRIC	CT OF ILL	INOIS							
	se number			-				☐ Ar	c if this is: n amende suppleme	d filing	ng postpetition ch	napter
$\bigcirc$	fficial Form	1001						13	3 income a	as of the	following date:	
	fficial Form							M	M / DD/ Y	YYY		
	chedule I:		OME sible. If two married peo									12/15
spo atta	use. If you are sep ch a separate she	parated and you	are married and not filii r spouse is not filing wi On the top of any additi	ith you, d	lo not includ	e infor	matio	on about	your spo	use. If n	nore space is ne	eded,
1.	Fill in your emplinformation.	loyment		Debto	r 1				Debtor 2	or non-	filing spouse	
	If you have more		Employment status	■ Em	■ Employed				☐ Employed			
	attach a separate information abou	, ,	Employment status	☐ Not employed				■ Not employed				
	employers.		Occupation	Medic	al Assistar	nt						
	Include part-time self-employed wo		Employer's name	Friend	dly Family I	Medica	ıl Ca	re				
	Occupation may or homemaker, if		Employer's address		ankview Dr fort, IL 604							
			How long employed to	here?	2 years							
Par	rt 2: Give De	tails About Mor	thly Income									
	mate monthly incuse unless you are		ate you file this form. If	you have	nothing to re	oort for	any I	ine, write	\$0 in the	space. Ir	nclude your non-fi	ling
	u or your non-filing e space, attach a s		ore than one employer, co	ombine th	e information	for all e	emplo	yers for t	hat perso	n on the	lines below. If you	ı need
								For Deb	tor 1		ebtor 2 or lling spouse	
2.			ry, and commissions (b calculate what the monthl			2.	\$	2,	692.08	\$	1,856.27	
3.	Estimate and lis	t monthly overt	ime pav.			3.	+\$		0.00	+\$	0.00	

2,692.08

1,856.27

Calculate gross Income. Add line 2 + line 3.

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Deb	tor 1	Maurielle Lerae Chambers		_		Case	number (if known)				
						Foi	Debtor 1		or Debtor		
	Сор	y line 4 here		4.		\$_	2,692.08	\$		,856.27	
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Secur	ity deductions	58	a.	\$	638.89	\$		350.31	
	5b.	Mandatory contributions for reti	rement plans	5b	ο.	\$	0.00	\$		0.00	•
	5c.	Voluntary contributions for retire	ement plans	50	<b>)</b> .	\$	107.68	\$		111.37	-
	5d.	Required repayments of retireme	ent fund loans	50	d.	\$	191.10	\$		135.05	-
	5e.	Insurance		56	€.	\$_	26.91	\$		228.00	
	5f.	Domestic support obligations		5f		\$_	0.00	\$		0.00	
	5g.	Union dues		50	j.	\$_	0.00	\$		0.00	
	5h.	Other deductions. Specify:		5h	า.+	\$_	0.00	+ \$		0.00	-
6.	Add	the payroll deductions. Add lines	5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	964.58	\$		824.73	-
7.	Calc	culate total monthly take-home pay	Subtract line 6 from line 4.	7.		\$_	1,727.50	\$	1	,031.54	
8.	List 8a.	all other income regularly received Net income from rental property profession, or farm Attach a statement for each proper receipts, ordinary and necessary b	and from operating a business, ty and business showing gross								
		monthly net income.		88		\$_	0.00	\$		0.00	
	8b.	Interest and dividends		8b	Ο.	\$_	0.00	\$		0.00	<u> </u>
	8c.	regularly receive	ou, a non-filing spouse, or a dependen child support, maintenance, divorce	t							
		settlement, and property settlemen		80	<b>.</b>	\$	0.00	\$		0.00	
	8d.	Unemployment compensation		80	d.	\$	0.00	\$		0.00	-
	8e.	Social Security		86	€.	\$	0.00	\$		0.00	=
	8f.		alue (if known) of any non-cash assistanc nps (benefits under the Supplemental	e 8f	:_	\$	0.00	\$		0.00	-
	8g.	Pension or retirement income		8g		\$	0.00	\$		0.00	-
	J		2nd Job - Home Health Care for			-	-				-
	8h.	Other monthly income. Specify:	State	8h	1.+	\$_	930.54	+ \$		0.00	-
9.	Add	all other income. Add lines 8a+8b-	+8c+8d+8e+8f+8g+8h.	9.	;	\$	930.54	\$		0.00	)
10	Calc	culate monthly income. Add line 7	Lline 9	10.	\$		2,658.04 + \$		1,031.54	= \$	3,689.58
		the entries in line 10 for Debtor 1 and			Ψ-		2,030.04		1,001.04		3,003.30
11.	Stat Inclu	e all other regular contributions to de contributions from an unmarried prifiends or relatives. not include any amounts already include	the expenses that you list in Schedule partner, members of your household, you uded in lines 2-10 or amounts that are not	r dep			•		n <i>Schedul</i> e	∍ J. +\$	0.00
12.		e that amount on the <i>Summary of Sc</i>	ine 10 to the amount in line 11. The re hedules and Statistical Summary of Certa							\$	3,689.58
										Combii	
13.	Do y ■	No. Yes. Explain:	e within the year after you file this forn	า?						monthl	y income

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E-11	in this inform	tion to identify				•		
FIII	in this informa	tion to identify y	our case:					
Deb	otor 1	Maurielle Le	rae Chan	nbers			k if this is:	
Deb	otor 2			<ul><li>☐ An amended filing</li><li>☐ A supplement showing postpetition chapter</li></ul>				
(Spo	ouse, if filing)					_	13 expenses as of	the following date:
Unit	ed States Bankr	ruptcy Court for the	: NORTH	ERN DISTRICT OF ILLIN	OIS	-	MM / DD / YYYY	
	e number nown)							
Of	fficial Fo	rm 106J				J		
S	chedule	J: Your	Exper	nses				12/1
Be info	as complete a	and accurate as	s possible eded, atta	. If two married people ar ich another sheet to this				
Par		ibe Your House	ehold					
1.	Is this a joir							
	■ No. Go to		in a senar	ate household?				
	□ N		пт и осриг	ate floudefloid.				
			st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of Debt	or 2.	
2.	Do you have	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Daughter		13	■ Yes
					Daughter		16	□ No ■ Yes
					Daugnter			■ Yes □ No
					Daughter		17	■ Yes
								□ No
3.	Do your eyr	oenses include	_					☐ Yes
Э.	expenses of	f people other t	than _	No				
	yourself and	d your depende	ents?	Yes				
Par		ate Your Ongoi						
exp				uptcy filing date unless y y is filed. If this is a supp				
				government assistance i				
	value of sucl ficial Form 10		id have inc	cluded it on <i>Schedule I:</i> \	our Income		Your exp	enses
4	The rental a	u hama aumana	nhin avnan					
4.		nd any rent for th		ses for your residence. I or lot.	nciude first mortgag	e 4. \$		1,238.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
		rty, homeowner'				4b. \$		0.00
		maintenance, re owner's associa		upkeep expenses dominium dues		4c. \$ 4d. \$		100.00 0.00
5.				our residence, such as ho	me equity loans	5. \$		0.00

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Debtor 1 Mauri	elle Lerae Chambers	Case num	ber (if known)	
6. Utilities:				
	city, heat, natural gas	6a.	\$	190.00
	sewer, garbage collection	6b.	\$	160.00
	one, cell phone, Internet, satellite, and cable services	6c.	· -	275.00
	Specify:	6d.	·	0.00
	pusekeeping supplies	7.	·	
			·	600.00
	d children's education costs	8.	\$	240.00
	ındry, and dry cleaning	9.	\$	150.00
	re products and services	10.	\$	100.00
	dental expenses	11.	\$	0.00
	on. Include gas, maintenance, bus or train fare. e car payments.	12.	\$	150.00
	nt, clubs, recreation, newspapers, magazines, and books	13.	·	0.00
	ontributions and religious donations	14.	Φ	0.00
5. Insurance.	e insurance deducted from your pay or included in lines 4 or 20.			
15a. Life ins		15a.	\$	0.00
15a. Life ins				
		15b.		0.00
15c. Vehicle		15c.	·	0.00
	nsurance. Specify:	15d.	\$	0.00
	ot include taxes deducted from your pay or included in lines 4 or 20.		•	
Specify:		16.	\$	0.00
	or lease payments:	170	¢.	000.00
	yments for Vehicle 1	17a.	·	366.00
	yments for Vehicle 2	17b.	·	0.00
	Specify: Student Loans	17c.	\$	100.00
17d. Other.		17d.	\$	0.00
	nts of alimony, maintenance, and support that you did not report as		\$	0.00
	om your pay on line 5, Schedule I, Your Income (Official Form 106I). ents you make to support others who do not live with you.	10.	\$	0.00
Specify:	into you make to support others who do not live with you.	19.	Ψ	0.00
	operty expenses not included in lines 4 or 5 of this form or on Sch		ur Incomo	
	ges on other property	20a.		0.00
-				
20b. Real es		20b.	·	0.00
•	ty, homeowner's, or renter's insurance	20c.	·	0.00
	nance, repair, and upkeep expenses	20d.		0.00
20e. Homed	wner's association or condominium dues	20e.	\$	0.00
. Other: Specif	fy:	21.	+\$	0.00
2 Calculate vo	ur monthly expenses	_		
	s 4 through 21.		\$	3,669.00
	3		\$	3,003.00
	e 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		·	
22c. Add line	22a and 22b. The result is your monthly expenses.		\$	3,669.00
3. Calculate vo	ur monthly net income.			
	ne 12 (your combined monthly income) from Schedule I.	23a.	\$	3,689.58
	our monthly expenses from line 22c above.	23b.	·	3,669.00
200. Сору у	out monthly expenses from the 220 above.	200.	Ψ	3,003.00
23c. Subtrac	ct your monthly expenses from your monthly income.			·
	sult is your <i>monthly net income</i> .	23c.	\$	20.58
	•			
	ct an increase or decrease in your expenses within the year after y			
	o you expect to finish paying for your car loan within the year or do you expect you	ır mortgage p	payment to increase	e or decrease because of
	the terms of your mortgage?			
No.				
☐ Yes.	Explain here:			

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Fill in this	s information to identify your	case:			
Debtor 1					
Depioi i	Maurielle Lerae C	Middle Name	Last Name		
Debtor 2					
(Spouse if, fi	ling) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	Γ OF ILLINOIS		
Case num	nber				
(if known)					☐ Check if this is an
					amended filing
Official	Form 106Dec				
		ا میداد ایداد میا	Dabtarla Ca	م ماریام م	
Decia	aration About a	<u>an individual</u>	Deptor's Sc	nedules	12/15
years, or I	both. 18 U.S.C. §§ 152, 1341, 1	l519, and 3571.			
Did	you pay or agree to pay some	eone who is NOT an atto	rney to help you fill out b	pankruptcy forms?	
_	No				
_				Attach Dani	lementare Datition Dranaman's Nation
	Yes. Name of person				kruptcy Petition Preparer's Notice, , and Signature (Official Form 119)
					,
	er penalty of perjury, I declare they are true and correct.	that I have read the sum	nmary and schedules file	ed with this declaration	on and
x /	s/ Maurielle Lerae Chambe	ers	X		
	Maurielle Lerae Chambers	<del></del>	Signature of	Debtor 2	
	Signature of Debtor 1		-		
	Date November 11, 2016		Date		
			·	·	· · · · · · · · · · · · · · · · · · ·

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Filli	in this inform	ation to identify you	r case:			
Deb	tor 1	Maurielle Lerae	Chambers			
		First Name	Middle Name	Last Name		
	tor 2 ise if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Bar	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case	e number					
(if kno					_	Check if this is an mended filing
Off	icial For	<u>m 107</u>				
Sta	tement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/10
infor numl	mation. If me ber (if known	ore space is needed, ). Answer every que	attach a separate sheet to	this form. On the top of any	equally responsible for sup y additional pages, write you	
1.	What is your	current marital statu	ıs?			
	■ Married □ Not marr	ried				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	_	all of the places you l	ived in the last 3 years. Do n	ot include where you live now	I.	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory ico, Texas, Washington and W	
	■ No □ Yes. Mal	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Explain	n the Sources of You	r Income	,		
	Fill in the total	I amount of income yo	u received from all jobs and	ng a business during this yeall businesses, including parter together, list it only once ur		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$28,104.00	☐ Wages, commissions, bonuses, tips	,
			☐ Operating a business		☐ Operating a business	

Official Form 107

Debtor 1 Maurielle Lerae Chambers

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Case number (if known)

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	r last caler inuary 1 to	ndar year: December 3	31, 2015 )	■ Wages, commissions, bonuses, tips	\$32,708.00	☐ Wages, com bonuses, tips		
				☐ Operating a business		☐ Operating a l	ousiness	
For the calendar year before that: (January 1 to December 31, 2014)			■ Wages, commissions, bonuses, tips	\$29,286.00	☐ Wages, com bonuses, tips	missions,		
				☐ Operating a business		☐ Operating a l	ousiness	
	and other winnings.  List each	public benefi If you are filin	t payments;   ng a joint cas ne gross inco	er that income is taxable. Exa pensions; rental income; inter e and you have income that y me from each source separat	est; dividends; money collec ou received together, list it c	ted from lawsuits; only once under De	royalties; and ebtor 1.	
				Debtor 1		Debtor 2		_
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of incomposition Describe below.		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pay	ments You	Made Before You Filed for I	Bankruptcy			
6.	Are eithe	r Debtor 1's	or Debtor 2'	s debts primarily consumer	debts?			
	□ No.			ebtor 2 has primarily consu personal, family, or househol		s are defined in 11	U.S.C. § 101	(8) as "incurred by an
		During the No.	90 days befo Go to line 7	re you filed for bankruptcy, di	d you pay any creditor a tota	l of \$6,425* or mor	e?	
		□ Yes	paid that cre	ach creditor to whom you paideditor. Do not include payment bayments to an attorney for the	its for domestic support oblig			
		* Subject t		on 4/01/19 and every 3 years		or after the date of	i adjustment.	
	■ Yes.			r both have primarily consure you filed for bankruptcy, die		l of \$600 or more?		
		No.	Go to line 7					
		□ <sub>Yes</sub>	include pay	ach creditor to whom you pai ments for domestic support ol this bankruptcy case.				
	Creditor	's Name and	Address	Dates of payme	nt Total amount	Amount you still owe	Was this p	ayment for

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Case number (if known) Document Debtor 1 Maurielle Lerae Chambers

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.					
	No					
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost		ments or transfer a	any property on a	ccount of a d	ebt that benefited an
	■ No					
	Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		this payment ditor's name
Pai	t 4: Identify Legal Actions, Repossessio	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  ■ No □ Yes. Fill in the details.					
		Notices of the case	Court or onener		Ctatus of th	ha aaaa
	Case title Case number	Nature of the case	Court or agency		Status of the	ne case
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo  No. Go to line 11.		rty repossessed, f	oreclosed, garnis	shed, attache	d, seized, or levied?
	☐ Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened	I			property
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?  No Yes. Fill in the details.					
	Creditor Name and Address	Describe the action the	creditor took	Date	action was	Amount
	Creditor Name and Address	Describe the action the	creditor took	taker		Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a  ■ No □ Yes		rty in the possess	ion of an assigne	e for the ben	efit of creditors, a
	163					
Pai	List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup	otcy, did you give any gifts	with a total value	of more than \$60	0 per person	?
	<ul><li>No</li><li>☐ Yes. Fill in the details for each gift.</li></ul>					
	Gifts with a total value of more than \$600 per person	Describe the gifts		Date the g	s you gave ifts	Value
	Person to Whom You Gave the Gift and Address:					

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Deb	otor 1	Maurielle Lerae Chambers		Document		Case number (	if known)	
14.		n 2 years before you filed for bank			ifts or contribut	ions with a total	value of more than	\$600 to any charity
	Gifts more Chari	'es. Fill in the details for each gift or or contributions to charities that than \$600 ity's Name ess (Number, Street, City, State and ZIP Co	total	on.  Describe what y	ou contributed		Dates you contributed	Value
Par	t 6:	List Certain Losses						
15.		n 1 year before you filed for bankr mbling?	uptcy or	since you filed fo	r bankruptcy, di	d you lose anytl	ning because of the	ft, fire, other disaste
	_	√es. Fill in the details.						
	Desc	ribe the property you lost and the loss occurred	Include	be any insurance the amount that in	nsurance has paid	d. List pending	Date of your loss	Value of property los
Par	+ 7·	List Certain Payments or Transfe	re			, ,		
	Person Addre Emai	No Yes. Fill in the details. On Who Was Paid ess il or website address on Who Made the Payment, if Not	You	Description and transferred	I value of any pr	operty	Date payment or transfer was made	Amount o paymen
	Bany 3077 Suite	yon & Scheinbaum, LLC West Jefferson Street e 107 et, IL 60435	100	\$500 (Attorne) \$835	y fee) + \$335 (I	Filing Fee) =		\$835.00
17.	promi	n 1 year before you filed for bankr ised to help you deal with your cre t include any payment or transfer tha	editors o	r to make paymer			r transfer any prope	rty to anyone who
		No /es. Fill in the details.						
		on Who Was Paid		Description and transferred	l value of any pr	operty	Date payment or transfer was made	Amount o paymen
18.	Include include	n 2 years before you filed for bank ferred in the ordinary course of you e both outright transfers and transfe e gifts and transfers that you have a No Yes. Fill in the details.	our businers made a	ess or financial a as security (such a	ffairs? s the granting of a			

Address

Description and value of

property transferred

Describe any property or

paid in exchange

payments received or debts

**Person Who Received Transfer** 

Person's relationship to you

Date transfer was

made

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Debtor 1 **Maurielle Lerae Chambers** 

19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prof		ny property to a	self-settle	ed trust or similar device	of which you are a	
	Yes. Fill in the details.						
	Name of trust	Description and	value of the prop	perty trans	sferred	Date Transfer wa made	S
Pai	rt 8: List of Certain Financial Accounts, Inst	truments, Safe Deposi	t Boxes, and Sto	orage Uni	ts		
20.	sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ	other financial accou	nts; certificates	of depos			
	No						
	Yes. Fill in the details.		_		_		
		Last 4 digits of account number	Type of accou instrument	int or	Date account was closed, sold, moved, or transferred	Last baland before closing of transfo	or
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed fo	r bankruptcy, an	ıy safe de	posit box or other depos	sitory for securities,	
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?	
22.	Have you stored property in a storage unit or  No	r place other than you	r home within 1	year befo	re you filed for bankrupt	cy?	
	☐ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?	
Pai	rt 9: Identify Property You Hold or Control f	·					
23.	Do you hold or control any property that som for someone.	neone else owns? Incl	ude any propert	y you bor	rowed from, are storing	for, or hold in trust	
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property	Valu	ıe
Pai	rt 10: Give Details About Environmental Info	rmation					
For	the purpose of Part 10, the following definitio	ns apply:					
	Environmental law means any federal, state, toxic substances, wastes, or material into the regulations controlling the cleanup of these	e air, land, soil, surfac	e water, ground				r
	Site means any location, facility, or property to own, operate, or utilize it, including dispos	-	environmental la	aw, wheth	ner you now own, operat	e, or utilize it or use	d

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

hazardous material, pollutant, contaminant, or similar term.

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Debtor 1 **Maurielle Lerae Chambers** 

24.	24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?					
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of	any release of hazardous material?				
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or adn	ninistrative proceeding under any envi	ronmental law? Include settlements	and orders.		
	■ No □ Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
Par	11: Give Details About Your Business or	Connections to Any Business				
27.	Within 4 years before you filed for bankrupt	cy, did you own a business or have an	y of the following connections to any	y business?		
	☐ A sole proprietor or self-employed in	n a trade, profession, or other activity,	either full-time or part-time			
	☐ A member of a limited liability comp	any (LLC) or limited liability partnersh	ip (LLP)			
	☐ A partner in a partnership					
	☐ An officer, director, or managing ex	ecutive of a corporation				
	☐ An owner of at least 5% of the voting	g or equity securities of a corporation				
	■ No. None of the above applies. Go to F	Part 12.				
	Yes. Check all that apply above and fill	in the details below for each business	<b>S.</b>			
	Business Name Address	Describe the nature of the business	Employer Identification numbe Do not include Social Security			
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed	number of frint.		
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	cy, did you give a financial statement t	to anyone about your business? Incl	ude all financial		
	■ No □ Yes. Fill in the details below.					
	Name Address (Number, Street, City, State and ZIP Code)					

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Debtor 1 Maurielle Lerae Chambers

Part 1	2: Sign Below		
are tru with a	ie and correct. I understand that makir	f Financial Affairs and any attachments, and I dec ng a false statement, concealing property, or obta p to \$250,000, or imprisonment for up to 20 years,	aining money or property by fraud in connection
/s/ M	aurielle Lerae Chambers		
Maurielle Lerae Chambers		Signature of Debtor 2	
Signa	ture of Debtor 1		
Date	November 11, 2016	Date	
Did yo	u attach additional pages to Your Sta	tement of Financial Affairs for Individuals Filing fo	or Bankruptcy (Official Form 107)?
■ No			
☐ Yes	3		
Did yo	ou pay or agree to pay someone who is	s not an attorney to help you fill out bankruptcy fo	orms?
■ No			

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	ation to identify your	ase:				
Debtor 1	Maurielle Lerae C	hambers Middle Name		Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name		Last Name		
		NORTHERN DIST				
United States Ban	kruptcy Court for the:	NORTHERN DIST	IRICI OF ILLI	NOIS		
Case number						☐ Check if this is an amended filing
Official For Statemen		n for Indiv	riduals	Filing Under C	Chapter 7	12/15
Statement of Intention for Individuals Filing Under Chapter 7  If you are an individual filing under chapter 7, you must fill out this form if:  creditors have claims secured by your property, or  you have leased personal property and the lease has not expired. You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form						
	ople are filing together I date the form.	in a joint case, bo	th are equally	responsible for supplying	g correct inform	ation. Both debtors must
	nd accurate as possib ur name and case nun		s needed, atta	ch a separate sheet to this	s form. On the to	op of any additional pages,
Part 1: List Yo	ur Creditors Who Have	Secured Claims				
For any credito information bel	-	rt 1 of Schedule D	: Creditors W	ho Have Claims Secured b	oy Property (Offi	cial Form 106D), fill in the
Identify the cree	ditor and the property th	at is collateral	What do you secures a o	ou intend to do with the prodebt?	operty that	Did you claim the property as exempt on Schedule C?
	ar Max Auto Finance			er the property.		□ No
name:				he property and redeem it. ne property and enter into a		Yes
Description of property	2013 Buick Verano	40,000 miles		nation Agreement. ne property and [explain]:		
securing debt:						
Part 2: List Yo	ur Unexpired Personal	Property Leases				
For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).						
Describe your ur	nexpired personal prop	erty leases			Will	the lease be assumed?
Lessor's name:						No
Description of lease Property:	sed					
. roporty.						res
Lessor's name: Description of leas	sed					No
Property:						Yes
Lessor's name:						No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

page 1

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Deb	otor 1	Maurielle Lerae Chambers	Case number (if known)	
	scription	n of leased		□ Yes
Des	ssor's n scriptio perty:	ame: n of leased		□ No
Des	ssor's n scription perty:	ame: n of leased		□ No □ Yes
Des	ssor's n scription perty:	ame: n of leased		□ No □ Yes
Des Pro	perty:	n of leased		□ No
Und	ler pen perty th	Sign Below alty of perjury, I declare that I have in nat is subject to an unexpired lease. Iaurielle Lerae Chambers	dicated my intention about any property of my estate that sec	ures a debt and any personal
•	Mau	rielle Lerae Chambers ature of Debtor 1	Signature of Debtor 2	
	Date	November 11, 2016	Date	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing tee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a>
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-35985 Doc 1 Filed 11/11/16 Entered 11/11/16 10:16:24 Desc Main Document Page 48 of 52

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**Northern District of Illinois

In re	e Maurielle Lerae Chambers		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMP	PENSATION OF ATTOR	RNEY FOR DE	EBTOR(S)
(	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the be rendered on behalf of the debtor(s) in contemplation	filing of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept			500.00
	Prior to the filing of this statement I have receiv	/ed	\$	500.00
	Balance Due		\$	0.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed co	ompensation with any other person	unless they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed composition copy of the agreement, together with a list of the	ensation with a person or persons we names of the people sharing in the	who are not members compensation is atta	or associates of my law firm. A ached.
5.	In return for the above-disclosed fee, I have agreed to	to render legal service for all aspects	s of the bankruptcy c	case, including:
1	<ul> <li>a. Analysis of the debtor's financial situation, and re</li> <li>b. Preparation and filing of any petition, schedules,</li> <li>c. Representation of the debtor at the meeting of cre</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to reaffirmation agreements and applications of the secured creditors of the secured creditors</li></ul>	statement of affairs and plan which editors and confirmation hearing, an to reduce to market value; exe ations as needed; preparation	n may be required; and any adjourned hea emption planning;	rings thereof;
6.	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any		service:	
		CERTIFICATION		
	I certify that the foregoing is a complete statement of bankruptcy proceeding.	f any agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
N	November 11, 2016	/s/ Christina Bany		
D	Date Control of the C	Christina Banyon Signature of Attorne		
		Banyon & Schein		
		3077 West Jeffers	son Street	
		Suite 107 Joliet, IL 60435		

cbanyon.law@gmail.com

Name of law firm

# **United States Bankruptcy Court Northern District of Illinois**

In re	Maurielle Lerae Chambers		Case No.	
	madriono Estas Orianisers	Debtor(s)	Chapter	7
	VE	CRIFICATION OF CREDITOR MA	TRIX	
		Number of C	reditors: _	24
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of creditor	rs is true and	correct to the best of my
Date:	November 11, 2016	/s/ Maurielle Lerae Chambers Maurielle Lerae Chambers Signature of Debtor		

American Anesthesiology PO Box 88087 Chicago, IL 60680

Associated Radiologists of Joliet 6801 W. 73rd Street #637 Bedford Park, IL 60499

Bank of the West PO Box 2634 Omaha, NE 68103

Capital One PO Box 6492 Carol Stream, IL 60197

Car Max Auto Finance PO Box 440609 Kennesaw, GA 30160

Cigna PO Box 182223 Chattanooga, TN 37422

Comcast 1711 E. Wilson Street Batavia, IL 60510

Comcast PO Box 3001 Southeastern, PA 19398

Comenity - The RoomPlace PO Box 659704 San Antonio, TX 78265

Comenity Bank PO Box 182273 Columbus, OH 43218

Comenity Bank / NWYRK & CO PO Box 659728 San Antonio, TX 78265

Credit One Bank PO Box 60500 City of Industry, CA 91716

Creditors Collections Bureau PO Box 63 Kankakee, IL 60901

First National Bank Omaha PO BOX 700 Paragould, AR 72451

Jefferson Capital System 16 Mcleland Road Saint Cloud, MN 56303

L Claude Ashinberg 114 Barney Joliet, IL 60435

New York and Company PO Box 659728 San Antonio, TX 78265

Personal Finance Company 2009 Essington Road Joliet, IL 60435

Presence Health Patient Financial Services 1643 Lewis Avenue, Suite 203 Billings, MT 59102

Presence Saint Joseph Medical Cente 32814 Collection Center Drive Chicago, IL 60693

Quest Diagnostics PO Box 740397 Cincinnati, OH 45274

RK Natesh 1100 Essington Road Suite 6 Joliet, IL 60435

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Trust Credit Solutions 12527 Central Avenue NE Suite 290 Minneapolis, MN 55434

Verizon Wireless PO Box 26055 Minneapolis, MN 55426